	PAIENI	JKL	,	6	X	ر م	و / ر	p						
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE				OTHER THAN R SMALL ENTITY		
TOTAL CLAIMS			35		•].	RATE	F	ĒĒ	1	RATE	FEE	
FOR			NUMBE	NUMBER FILED		NUMBER EXTRA		BASIC F		5.00	OR	BASIC FE	 	
TOTAL CHARGEABLE CLAIMS			300	35 minus 20=		11.		XS 9:	_			VC10	1	
INDEPENDENT CLAIMS			4 minus 3 =		• /				- 	_	OR	X\$18=	2 70	
MULTIPLE DEPENDENT CLAIM PI								X43=			OR	X86=	188	
								+145=			OR	+290=	•	
* If the difference in column 1 is less than zero, enter "0" in column 2								TOTA	-		OR	TOTAL	1126	
CLAIMS AS AMENDED - PART II						OTHER THAN								
_		(Column 1)		(Column 2) (Column 3				SMAL	L ENTI	ry ·	OR _	SMALL	ENTITY	
AMENDMENT A		REMAINING AFTER AMENDMENT		NUME PREVIO PAID F	BER USLY	PRESENT EXTRA		RATE	ADI TION FE	IAL		RATE	ADDI- TIONAL FEE	
Š	Total	*	Minus	**		2		X\$ 9=			OR	X\$18=		
JME	Independent	•	Minus	***		=	İ	X43=	+-	7	OR	X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=	+					
·										_	OR	+290=		
		TOTA DDIT. FEI			OR A	TOTAL DDIT, FEE								
	· · ·	(Column 1)	_	(Colum		(Column 3)								
AMENDMENT B		REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIOL PAID F	ER JSLY	PRESENT EXTRA		RATE	ADD TION FEI	AL		RATE	ADDI- TIONAL FEE	
	Total	•	Minus	***		=		X\$ 9=			OR	X\$18=		
	Independent	•	Minus	***		= .	t	X43=		7	OR	X86=		
	FIRST PRESE	NTATION OF ML	JLTIPLE DEI	PENDENT (CLAIM		┢		 	\dashv	" }			
										_ 0	R	+290=		
										0	RA	TOTAL DDIT. FEE		
		(Column 1)		(Column		(Column 3)	,		•					
MEN	`	CLAIMS REMAINING AFTER AMENDMENT	•	HIGHES NUMBE PREVIOU PAID FO	R ISLY	PRESENT EXTRA		RATE	ADD TION/ FEE	VL.		RATE	ADDI- TIONAL FEE	
	Total	•	Minus	**		-		 X\$ 9=		\neg	۵Г	X\$18=		
	Independent		Minus	***		2	上	X43=			\Box	X86=		
1	FIRST PRESE	NTATION OF MU	LTIPLE DEF	ENDENT C	LAIM		-	A-10-		- °	R	100 − 100		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." **TOTAL OR ADDIT 555														
	the "Highest Nun	nber Previously Pai nber Pr viously Pai ber Previously Paid	d For IN THI	S SPACE is I	ess than	3. enter *3.*		DIT. FEE	propriate	Ol box in	~	OIT. FEE L		
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Application or Docket Number